

A Global Vision of Chiropractic Care

AN INTERVIEW WITH MOLLY MERI ROBINSON, DC, TECHNICAL OFFICER FOR THE WORLD HEALTH ORGANIZATION IN GENEVA.

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Dr. Molly Meri Robinson, a November 2007 graduate of [Northwestern Health Sciences University](#), has been a chiropractor for less than two years, but already she has accomplished something no other member of the profession has done. Dr. Robinson, who completed a three-month student internship with the [World Health Organization](#) last year, recently accepted a one-year position with the Geneva-headquartered organization as a technical officer in the Traditional Medicine Program—the first doctor of chiropractic ever seconded to a full-time position at the WHO.

The World Health Organization directs and coordinates health care policy within the [United Nations system](#), providing leadership and support on global health, assessing health trends, and developing norms and standards for health care delivery. Dr. Robinson has been involved with the Traditional Medicine Program at the WHO since her days as an intern. (In another first, she was the first chiropractor to serve as an intern in the program.) In this exclusive two-part interview with *DC*, Dr. Robinson shares her passion for chiropractic and global health care, including what led her to the WHO and why doctors of chiropractic worldwide should support this important organization.

Let's start with a little background - what made you decide to become a chiropractor? I always knew that I was meant to go into health care; I just didn't know exactly where. I have been an athlete since I was about 4 years old, and I grew up seeing orthopedists, general practitioners, or physical therapists if I got hurt. The first time I ever saw a chiropractor personally was when I was 17, although I had been saying I was going to be one for years without really understanding what it was all about.

I had looked at a variety of different options, and was drawn to chiropractic for one very important reason. All of the doctors out there work to fix you when you're broken, and chiropractic can do this as well as any other profession, but doctors of chiropractic also try to prevent you from getting hurt in the first place. I liked the idea of being able to provide trauma care [and] also trying to avoid the injury, rather than only being able to wait for something to go wrong.



Describe the experiences and/or process that led you to enroll at Northwestern. Northwestern was the perfect fit for me, and while I cannot say that I would not have been as happy at another school, I will say that I was thrilled with the education and opportunities that Northwestern provided. I looked at several schools when I was first exploring, and Northwestern immediately made the list, along with Western States, New York Chiropractic College and National. I was drawn to Northwestern because they had integrated with other programs which, at that time, was still fairly unique.

In addition, when I visited Northwestern, it just felt right. [Dr. Al Traina \[former university](#)

[president\]](#) may not remember stopping to talk to a curious redhead about seven years ago, but I will not forget that he did. Northwestern continues this today; the open-door policies of President Mark Zeigler and Dean Michael Wiles, together with their nearly endless patience and limitless support, made that school the best experience I could have asked for.

How did you become aware of the WHO internship program? I actually never knew that WHO accepted interns prior to attending the [World Congress of Chiropractic Students \(WCCS\)](#) annual conference in 2007, hosted by the University of Johannesburg and then-chair Dylan Herwill, in Johannesburg, South Africa. Several of the individuals who were already well-established within WCCS, such as Dr. Edward Leonard, former [SACA \[Student American Chiropractic Association\]](#) national vice chair, and Dr. Martin Cook, former WCCS chair, were promoting the idea.

They explained to the group that although there was nothing prohibiting chiropractic students from applying for internship positions, there had not yet been one accepted to the program. After being encouraged by a number of individuals at the conference and speaking with the WCCS executive board to get more information and to garner their support, I went back to Minnesota to see if I could make it happen.

What sparked your interest in applying for the intern position? There were several things about the internship program at WHO which I found intriguing. Having always been active within [SACA], culminating with a year as the national legislative chair, I was already passionately committed to working on behalf of the chiropractic profession and for our patients through public education, legislation, and other efforts. Working at WHO, the global clearinghouse for health care information and normative practice guidelines, seemed like the logical next step. Here was a larger stage from which I could try to affect health care policy for the benefit of patients.

I was also interested in the placement of the practice of chiropractic in the Traditional Medicine Program at WHO. I quickly learned that although "traditional medicine" might be assumed to be allopathic care in the United States and other industrialized countries, such is not the case in the rest of the world. The majority of nations and their people do not have access to the pharmaceutical-driven health care system I grew up with, and for them, traditional medicine is what existed long before the discovery of penicillin or laser eye-surgery. This sounded like something to be a part of.

Describe your general experiences as a WHO intern - responsibilities, job duties, etc. My experiences as a WHO intern were as widely varied as you can imagine, and then some. I began by being briefed on all of the documentation and information that the Traditional Medicine Program had produced since the start of their efforts, so that I would have a strong foundation from which to understand the initiatives and programs around me. They had me write and edit a number of documents right away, presumably to see if I could write the way they wanted me to, and from there I just hit the ground running.

I edited, wrote, and re-wrote so many things, including the second edition of the [WHO Global Survey on National Policy and Regulation of Herbal Medicine and the Practice of Complementary, Alternative, and Traditional Medicine](#), letters to WHO collaborating centers and WHO partners, several sets of [Guidelines of Basic Training and Safety](#) in a variety of health care practices, and everything else in between. My job was essentially to do whatever they needed me to do, and that list spanned basic administrative assistant duties to attending, on behalf of the program, the initial meetings to outline standard definitions on traditional medicine terminology from all over the world. It was definitely intense and required that I learn on the job and be willing to adapt my perspective every day.

When offered a staff position at WHO, what was your initial reaction? Being offered the chance to return to WHO as a staff member was an honor not to be taken lightly. I was proud that I had done a satisfactory job during those first few months [as an intern], but also concerned about being the first person ever hired to serve in a specifically chiropractic-related technical officer position. There was never any question for me about whether or not I would take the position, but I did have a few little nagging doubts. My biggest concern was the fact that I would be giving up practice. I really love being a doctor of chiropractic, and I really love delivering patient care. I never intended to wind up in politics or policy as a full-time job, but here I am.

What ultimately led you to accept the position? What it came down to was a distinct sense of obligation. I have spent the last several years telling students that every one of us has a duty to give what we can for the protection and preservation of our profession. I frequently make the statement that what we do is a circle; that when we are students, we have time, and so that is what we must give, through organizations like SACA and WCCS.

When we are doctors, however, we will not always have the time, as we focus on building practices and seeing patients, so the best thing we can do [then] is to give money and to support the efforts of the organizations which work on our behalf and in support of the students who are being trained to continue this cycle. I truly believe this, and I know that right now, this is the place from which I can have the most impact. When I look at it this way, the choice is easy. I do hope to get back to practice some day, but this is the best thing I can do for our profession right now.

In part 2 of this interview (April 22 issue), Dr. Robinson describes her current job responsibilities at WHO and explains why chiropractic support and participation are so important to the future of the profession.

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